POST-EVENT SUMMARY REPORT
Name of Event: Senior Injury Prevention Conference
Date of Event: May 19, 2005
Location of Event: Sacramento, California
Number of Persons Attending: 110
Sponsoring Organization(s): Alameda County Public Health Dept, UC Davis Medical Center, California Dept of Health Services, Center for Injury Prevention Policy and Practice
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PRIORITY ISSUE #1

<u>Health and Long Term Living</u> - Healthy Lifestyles, Prevention and Disease Management
Barriers:
- Lack of funding for programs that encourage and educate about healthy lifestyles
- Responsibility for prevention is pushed downstream until it becomes a treatment issue
- Ageism
- Lack of public education promoting preventative care
- The current system is not set up to encourage prevention or healthy lifestyles rather it is focused on treating diseases once they have been exacerbated to the point that they require hospitalization and medical intervention which is much more expensive and draining to the health care system than early intervention would be
- Lack of physician education and involvement in safe aging

Solution:
- Money follows the person - instead of forcing institutionalization to receive benefits and services, let community dwelling older adults receive the same amount of financial support to keep them independent and healthy (individually designed home based exercise programs, healthy diet and nutrition programs, with telephone support and encouragement).
- Coordinated social and health services that maximize opportunities to age in place
- Grants for home safety modification programs
- Make Healthy Aging a Public Health issue with Public Health Departments providing information and services that promote healthy aging
- More promotion of healthy aging in the media by portraying the aging process as a positive, potentially enjoyable and even fun part of life.
- Support Falls Prevention <u>interventions</u> and <u>education</u> instead of more research
- Establish housing/building regulations that provide for safe, environments (Universal Design) with accessibility to services and are integrated into the community (shopping, etc.) rather than age segregated
- Get physicians/staff on board with healthy aging and prevention interventions - add healthy aging education as a requirement to physician continuing education and include the topic in medical school

Social Engagement
Barriers:
- Transportation availability
- No public transportation in many sub-urban and rural areas
- No shelter at bus stops
- Negative stigma attached to public transportation
- Safety issues
- Ageism - the "senior" image

Solution:
- Require inclusion of transportation options in any new multiple dwelling plans or renovations
- Media campaign making public transportation more attractive
- make communities more accessible to all generations (schools, work, play, shopping, etc.)
- Volunteer driving programs
- Create funding to encourage co-housing
- Encourage and allow older adults to combine benefits in order to live in co-housing situations
- "Social Centers" rather than "Senior Centers"
- Planned sessions, combined forums and conferences to integrate intergenerational, multi-ethnic education and information sharing (music, food, cultural history)
- Fund programs to help drivers maintain skills as they age

PRIORITY ISSUE # 3

Our Community
Barriers:
- Lack of coordinated services
- Lack of Funding
- Poor urban/sub-urban planning
- Homes not designed for aging or disabled population
- Lack of physician involvement in safe aging
- No model in place for intercommunication among programs

Solution:
- Provide incentives for inter-agency collaboration
- Establish liaisons between agencies
- Create clearly defined expectations of inter-agency collaboration
- Offer financial rewards for collaborations that include multiple agencies and the community
- Get away from the "old folks" image
- Create "social centers" rather than "senior centers" - places that appeal to younger

        "seniors" by offering job skill training, entertainment, etc.
- Create programs in High Schools that provide a forum for teens and older adults to interact with frank discussions on being a teen/older adult in today's world

Overall suggestion:

Start making use of the copious amounts of existing research on aging, falls prevention, etc. and fund implementation of programs NOW, rather than continuing to focus on funding yet more research that proves over and over what has already been proven. We need to have programs in place and running smoothly before the huge population of baby-boomers reach 65. We can't afford to wait for the next WHCoA to realize that we needed to have these programs in place 10 years ago.